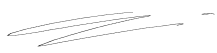


Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name JACK'S		Telephone Number Est 502-645-2200 Own 502-645-2200		Date of Inspection 08/14/2020	ID#
Address 3308 PLAZA DRIVE, NEW ALBANY IN 47150		Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)		Follow Up	Released 08/24/2020
Owner SUSAN LANGNESS				Menu Type 1 _ 2 _ 3 <u>X</u> 4 _ 5 _	
Owner's Address 200 ROSEWOOD DRIVE CLARKSVILLE, IN 47130					
Person in Charge GREG COOPER					
Responsible Person's Email THESENUTS42070@GMAIL.COM					
Certified Food Handler JASON LANGNESS					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"					
Section #	C	NC	R	Narrative	To Be Corrected
297		X		Observed interior of ice machine to be moldy.	TODAY
324		X		Observed leak in handsink trap.	1 WEEK
342		X		Observed handsink to have minimum flow.	1 WEEK
Summary of Violations C <u>0</u> NC <u>3</u> R <u>0</u>					
Received by (name and title printed): GREG COOPER			Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST		
Received by (signature):			Inspected by (signature): 		
cc:		cc:		cc:	